



**APPLICATION FORM
for a
VARIANCE
Mauka & Makai Area Plan and Rules**



Application No. _____

RECORDED OWNER:

Name: _____

Mailing Address: _____

Telephone/FAX: _____

AGENT:

Name: _____

Mailing Address: _____

Telephone/FAX: _____

SITE:

Street Address: _____

Tax Map Key: _____

Lot Size: _____

Mixed-Use Zone: _____

Present Use of Property and/or Buildings: _____

SIGNATURE:

Land Owners in Fee

Date

Applicant